

<010> Study Area Code	378035
<015> Study Area Name	Pinpoint Wireless, Inc.
<020> Program Year	2018
<030> Contact Name: Person USAC should contact with questions about this data	Lisa Ruf
<035> Contact Telephone Number: Number of the person identified in data line <030>	3086973375 ext.
<039> Contact Email: Email of the person identified in data line <030>	lisa.ruf@pnpt.com

<040> Has the information required pursuant to §54.1009 been provided with a Form 481 filing (Y/N) ☐ ☒

<041> Attach a description of the documents filed with the Form 481 reporting

<041>

<042> Cite the Study Area Code (SAC) for the Form 481 reporting

<042>

<080> Tribal Lands Reporting (y/n?) *(Does this study area cover tribal lands? Yes or No)* ☐ ☒

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lisa.ruf@pnpt.com

Reporting Carrier / Mobility Fund Phase 1 Winning Bidder

<110>	FCC Registration Number	2377901
<111>	Filing Carrier Name	Pinpoint Wireless, Inc.
<112>	Winning Bidder Carrier Name	Pinpoint Wireless, Inc.
<113>	Street Address (or PO Box)	611 Patterson St.
<114>	City	Cambridge
<115>	State	NE
<116>	Zip-Code	69022
<117>	Telephone Number	3086973375 ext.
<118>	Fax Number	3086973631
<119>	Email Address	lisa.ruf@pnpt.com

Contact Information

if same as above, indicate in this box



<120>	Name (First, MI, Last, Suffix)	Lisa Ruf
<121>	Filing Carrier Name	Pinpoint Wireless, Inc.
<122>	Street Address (or PO Box)	611 Patterson St.
<123>	City	Cambridge
<124>	State	NE
<125>	Zip-Code	69022
<126>	Telephone Number	3086973375 ext.
<127>	Fax Number	3086973631
<128>	Email Address	lisa.ruf@pnpt.com

Authorized Agent Information

if no agent, indicate in this box



<130>	Name (First, MI, Last, Suffix)	
<131>	Company	
<132>	Street Address (or PO Box)	
<133>	City	
<134>	State	
<135>	Zip-Code	
<136>	Telephone Number	
<137>	Fax Number	
<138>	Email Address	

(060) Coverage and Performance Report

FCC Form 690

Approved by OMB

OMB Control No. 3060-1185

Page 3 of 8

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lisa.ruf@pnpt.com
<140>	Coverage and Performance Report Year	01/2017 - 08/2017

Coverage and Performance attachments

378035_CPre_Broadband_and_Voice_NE.zip,
378035_CPre_DriveTest_NE.zip,
378035_CPre_PropagationStudy_NE.zip

<141>	<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
	State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (Yes/no)
				-- See attached worksheet						
				--						

Percentage of Total
Population Reached by
Service

0

Percentage of Total
Road Miles covered
by Service

99

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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)	
I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	Pinpoint Wireless, Inc.
Signature of Authorized Officer:	CERTIFIED ONLINE Date 06/29/2018
Printed name of Authorized Officer:	J Thomas Shoemaker
Title or position of Authorized Officer:	Executive Vice President
Telephone number of Authorized Officer:	3086973375 ext.
Study Area Code of Reporting Carrier:	378035 Filing Due Date for this form: 07/02/2018
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lisa.ruf@pnpt.com

<142> State _____

<143> County _____

<144> Tribal Land(s) on which ETC Serves _____

<145> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, Not Applicable) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes:

- <146> Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- <147> Feasibility and sustainability planning;
- <148> Marketing services in a culturally sensitive manner;
- <149> Compliance with Rights of way processes
- <150> Compliance with Land Use permitting requirements
- <151> Compliance with Facilities Siting rules
- <152> Compliance with Environmental Review processes
- <153> Compliance with Cultural Preservation review processes
- <154> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, Not Applicable)

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<200> Date Authorized to Receive Support

06/07/2013

<201> Targeted Completion Date

09/30/2014

<202> Total Mobility Fund Support Awarded

314759.52

<203> Total Mobility Fund Support Disbursed

307457.10

<210> Actual Completion Date

12/20/2014

<211> Project Status Description (attached)

211_378035.pdf

{Name of PDF attached}

Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.

<212> Status of Network Deployment - Network Design

✓

<213> Status of Network Deployment - Construction

✓

<214> Status of Network Deployment - Deployment

✓

<215> Status of Network Deployment - Maintenance

✓

<216> Project Budget Status

✓

<217> Project Plan Status

✓

<218> Network will Support 3G/4G Mobile Service ?



3G



4G

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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:**Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients**

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: Pinpoint Wireless, Inc.

Signature of Authorized Officer: CERTIFIED ONLINE

Date 06/29/2018

Printed name of Authorized Officer: J Thomas Shoemaker

Title or position of Authorized Officer: Executive Vice President

Telephone number of Authorized Officer: 3086973375 ext.

Study Area Code of Reporting Carrier: 378035

Filing Due Date for this form: 07/02/2018

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File for Mobility Fund Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
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TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent Firm: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Name of Authorized Agent Employee: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

(060) Coverage and Performance ReportFCC Form 690
Approved by OMB
OMB Control No. 3060-1185

<010> Study Area Code 378035
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<140> Coverage and Performance Report Year 01/2017 - 08/2017

<141>									
<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (yes/no)
NE	Red Willow	311459631001016	0	0	0	0.44	0.42	0.42	Yes
NE	Red Willow	311459631001020	0	0	0	0.06	0.06	0.06	Yes
NE	Red Willow	311459631001032	0	0	0	0.25	0.25	0.25	Yes
NE	Red Willow	311459631001048	0	0	0	0.12	0.12	0.12	Yes
NE	Red Willow	311459631001513	0	0	0	0.02	0.02	0.02	Yes
NE	Red Willow	311459631001514	0	0	0	0.31	0.31	0.31	Yes
NE	Red Willow	311459631001515	0	0	0	1.36	1.36	1.36	Yes
NE	Red Willow	311459631001516	0	0	0	0.12	0.12	0.12	Yes
NE	Red Willow	311459631001517	0	0	0	0.22	0.22	0.22	Yes
NE	Red Willow	311459631003150	0	0	0	5.22	5.22	5.22	Yes
NE	Red Willow	311459631003164	0	0	0	2.87	2.87	2.87	Yes
NE	Red Willow	311459631003168	0	0	0	3.48	3.48	3.48	Yes
NE	Red Willow	311459631003169	0	0	0	0.37	0.37	0.37	Yes
NE	Red Willow	311459631003170	0	0	0	0.44	0.44	0.44	Yes
NE	Red Willow	311459631003171	0	0	0	0.08	0.08	0.08	Yes
NE	Red Willow	311459631003172	0	0	0	0.95	0.95	0.95	Yes
NE	Red Willow	311459631003173	0	0	0	0.36	0.36	0.36	Yes
NE	Red Willow	311459631003174	0	0	0	0.58	0.58	0.58	Yes
NE	Red Willow	311459631003175	0	0	0	0.29	0.29	0.29	Yes
NE	Red Willow	311459631003176	0	0	0	0.64	0.64	0.64	Yes

Percentage of
Total Population
Reached by
Service

0

Percentage of Total
Road Miles covered
by Service

99

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OMB Control No. 3060-1185

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<140> Coverage and Performance Report Year 01/2017 - 08/2017

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<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (yes/no)
NE	Red Willow	311459631003178	0	0	0	1.19	1.19	1.19	Yes
NE	Red Willow	311459631003179	0	0	0	0.03	0.03	0.03	Yes
NE	Red Willow	311459631003182	0	0	0	0.09	0.09	0.09	Yes
NE	Red Willow	311459631003233	0	0	0	6.36	6.09	6.09	Yes
NE	Red Willow	311459631003245	0	0	0	3.04	2.95	2.95	Yes
NE	Red Willow	311459631003247	0	0	0	2.22	2.22	2.22	Yes
NE	Red Willow	311459631003248	0	0	0	0.56	0.56	0.56	Yes
NE	Red Willow	311459631003249	0	0	0	0.61	0.61	0.61	Yes
NE	Red Willow	311459631003250	0	0	0	0.15	0.15	0.15	Yes
NE	Red Willow	311459631003251	0	0	0	0.25	0.25	0.25	Yes
NE	Red Willow	311459631003252	0	0	0	2.35	2.35	2.35	Yes
NE	Red Willow	311459631003253	0	0	0	0.13	0.13	0.13	Yes
NE	Red Willow	311459631003256	0	0	0	0.39	0.39	0.39	Yes
NE	Red Willow	311459631003257	0	0	0	0.42	0.42	0.42	Yes
NE	Red Willow	311459631003258	0	0	0	0.56	0.56	0.56	Yes
NE	Red Willow	311459631003259	0	0	0	0.34	0.34	0.34	Yes
NE	Red Willow	311459631003260	0	0	0	0.33	0.33	0.33	Yes
NE	Red Willow	311459631003261	0	0	0	0.94	0.94	0.94	Yes
NE	Red Willow	311459631003263	0	0	0	0.09	0.09	0.09	Yes
NE	Red Willow	311459631003264	0	0	0	0.76	0.76	0.76	Yes

Percentage of
Total Population
Reached by
Service

0

Percentage of Total
Road Miles covered
by Service

99

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State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (yes/no)
NE	Red Willow	311459631003265	0	0	0	1.19	1.19	1.19	Yes
NE	Red Willow	311459631003284	0	0	0	1.79	1.79	1.79	Yes
NE	Red Willow	311459631003285	0	0	0	0.98	0.98	0.98	Yes
NE	Red Willow	311459631003286	0	0	0	0.65	0.65	0.65	Yes
NE	Red Willow	311459631003287	0	0	0	0.99	0.99	0.99	Yes
NE	Red Willow	311459631003288	0	0	0	3.21	3.09	3.09	Yes
NE	Red Willow	311459631003289	0	0	0	0.07	0.07	0.07	Yes
NE	Red Willow	311459631003291	0	0	0	2.05	1.99	1.99	Yes
NE	Red Willow	311459631003292	0	0	0	2.06	2.01	2.01	Yes
NE	Red Willow	311459631003293	0	0	0	1.36	1.36	1.36	Yes
NE	Red Willow	311459631003294	0	0	0	0.27	0.27	0.27	Yes
NE	Red Willow	311459631003295	0	0	0	0.1	0.1	0.1	Yes
NE	Red Willow	311459631003296	0	0	0	1.03	1.03	1.03	Yes
NE	Red Willow	311459631003297	0	0	0	0.07	0.07	0.07	Yes
NE	Red Willow	311459631003298	0	0	0	0.1	0.1	0.1	Yes
NE	Red Willow	311459631003299	0	0	0	0.07	0.07	0.07	Yes
NE	Red Willow	311459631003300	0	0	0	0.28	0.28	0.28	Yes
NE	Red Willow	311459631003301	0	0	0	1.51	1.51	1.51	Yes
NE	Red Willow	311459631003302	0	0	0	0.32	0.32	0.32	Yes
NE	Red Willow	311459631003303	0	0	0	0.25	0.25	0.25	Yes

Percentage of
Total Population
Reached by
Service

0

Percentage of Total
Road Miles covered
by Service

99

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State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (yes/no)
NE	Red Willow	311459631003304	0	0	0	0.72	0.72	0.72	Yes
NE	Red Willow	311459631003305	0	0	0	0.11	0.11	0.11	Yes
NE	Red Willow	311459631003306	0	0	0	0.52	0.52	0.52	Yes
NE	Red Willow	311459631003313	0	0	0	0.04	0.04	0.04	Yes
NE	Red Willow	311459631003316	0	0	0	0.31	0.31	0.31	Yes
NE	Red Willow	311459631003317	0	0	0	0.08	0.08	0.08	Yes
NE	Red Willow	311459631003341	0	0	0	0.46	0.46	0.46	Yes
NE	Red Willow	311459631003342	0	0	0	0.44	0.44	0.44	Yes
NE	Red Willow	311459631003344	0	0	0	0.94	0.94	0.94	Yes
NE	Red Willow	311459631003352	0	0	0	0.1	0.1	0.1	Yes
NE	Red Willow	311459631003353	0	0	0	0.09	0.09	0.09	Yes
NE	Red Willow	311459631003355	0	0	0	0.45	0.45	0.45	Yes
NE	Red Willow	311459631003356	0	0	0	0.04	0.04	0.04	Yes
NE	Red Willow	311459631003357	0	0	0	0.1	0.1	0.1	Yes
NE	Red Willow	311459631003358	0	0	0	0.06	0.06	0.06	Yes
NE	Red Willow	311459631003359	0	0	0	0.27	0.27	0.27	Yes
NE	Red Willow	311459631003360	0	0	0	0.15	0.15	0.15	Yes
NE	Red Willow	311459631003361	0	0	0	0.11	0.11	0.11	Yes
NE	Red Willow	311459631003363	0	0	0	0.62	0.62	0.62	Yes
NE	Red Willow	311459631003364	0	0	0	1.17	1.17	1.17	Yes

Percentage of
Total Population
Reached by
Service

0

Percentage of Total
Road Miles covered
by Service

99

(060) Coverage and Performance Report

FCC Form 690
Approved by OMB
OMB Control No. 3060-1185

<010> Study Area Code 378035
 <015> Study Area Name Pinpoint Wireless, Inc.
 <020> Program Year 2018
 <030> Contact Name - Person USAC should contact regarding this data Lisa Ruf
 <035> Contact Telephone Number - Number of person identified in data line <030> 3086973375 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> lisa.ruf@pnpt.com
 <140> Coverage and Performance Report Year 01/2017 - 08/2017

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (yes/no)
NE	Red Willow	311459631003365	0	0	0	0.68	0.68	0.68	Yes
NE	Red Willow	311459631003366	0	0	0	0.05	0.05	0.05	Yes
NE	Red Willow	311459631003367	0	0	0	0.12	0.12	0.12	Yes
NE	Red Willow	311459631003368	0	0	0	0.04	0.04	0.04	Yes
NE	Red Willow	311459631003369	0	0	0	0.28	0.28	0.28	Yes
NE	Red Willow	311459631003370	0	0	0	0.16	0.16	0.16	Yes
NE	Red Willow	311459631003371	0	0	0	0.2	0.2	0.2	Yes
NE	Red Willow	311459631003373	0	0	0	0.12	0.12	0.12	Yes
NE	Red Willow	311459631003374	0	0	0	0.32	0.32	0.32	Yes
NE	Red Willow	311459631003376	0	0	0	0.23	0.23	0.23	Yes
NE	Red Willow	311459631003378	0	0	0	0.08	0.08	0.08	Yes
NE	Red Willow	311459631003379	0	0	0	0.28	0.28	0.28	Yes
NE	Red Willow	311459631003381	0	0	0	0.14	0.14	0.14	Yes
NE	Red Willow	311459631003394	0	0	0	0.08	0.08	0.08	Yes
NE	Red Willow	311459631003395	0	0	0	0.13	0.13	0.13	Yes
NE	Red Willow	311459631003397	0	0	0	0.08	0.08	0.08	Yes
NE	Red Willow	311459631003399	0	0	0	0.16	0.16	0.16	Yes
NE	Red Willow	311459631003400	0	0	0	0.0	0.0	0.0	Yes
NE	Red Willow	311459631003409	0	0	0	0.13	0.13	0.13	Yes
NE	Red Willow	311459631003410	0	0	0	0.14	0.14	0.14	Yes

Percentage of
Total Population
Reached by
Service

0

Percentage of Total
Road Miles covered
by Service

99

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OMB Control No. 3060-1185

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<140> Coverage and Performance Report Year 01/2017 - 08/2017

<141>									
<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (yes/no)
NE	Red Willow	311459631003411	0	0	0	0.15	0.15	0.15	Yes
NE	Red Willow	311459631003412	0	0	0	0.14	0.14	0.14	Yes
NE	Red Willow	311459631003413	0	0	0	0.14	0.14	0.14	Yes
NE	Red Willow	311459631003414	0	0	0	0.14	0.14	0.14	Yes
NE	Red Willow	311459631003415	0	0	0	0.14	0.14	0.14	Yes
NE	Red Willow	311459631003416	0	0	0	0.14	0.14	0.14	Yes
NE	Red Willow	311459631003417	0	0	0	0.14	0.14	0.14	Yes
NE	Red Willow	311459631003423	0	0	0	0.05	0.05	0.05	Yes
NE	Red Willow	311459631003426	0	0	0	0.36	0.36	0.36	Yes
NE	Red Willow	311459631003428	0	0	0	0.87	0.87	0.87	Yes
NE	Red Willow	311459631003429	0	0	0	1.02	1.02	1.02	Yes
NE	Red Willow	311459631003430	0	0	0	0.73	0.73	0.73	Yes
NE	Red Willow	311459631003437	0	0	0	0.16	0.16	0.16	Yes
NE	Red Willow	311459631003439	0	0	0	0.42	0.42	0.42	Yes
NE	Red Willow	311459631003440	0	0	0	0.1	0.1	0.1	Yes
NE	Red Willow	311459631003441	0	0	0	0.29	0.29	0.29	Yes
NE	Red Willow	311459631003443	0	0	0	0.45	0.45	0.45	Yes
NE	Red Willow	311459631003444	0	0	0	0.13	0.13	0.13	Yes
NE	Red Willow	311459631003445	0	0	0	0.22	0.22	0.22	Yes
NE	Red Willow	311459631003446	0	0	0	0.14	0.14	0.14	Yes

Percentage of
Total Population
Reached by
Service

0

Percentage of Total
Road Miles covered
by Service

99

FCC Form 690
Approved by OMB
OMB Control No. 3060-1185

<010>	Study Area Code	378035
<015>	Study Area Name	Pinpoint Wireless, Inc.
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<030>	Contact Name - Person USAC should contact regarding this data	Lisa Ruf
<035>	Contact Telephone Number - Number of person identified in data line <030>	3086973375 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lisa.ruf@pnpt.com
<140>	Coverage and Performance Report Year	01/2017 - 08/2017

[illegible]

Percentage of
Total Population
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Service

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Percentage of Total
Road Miles covered
by Service

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